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JCS952 U.S. PTO

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NON-PROVISIONAL
UTILITY PATENT APPLICATION
TRANSMITTAL - 37 CFR 1.53(b)

[] Duplicate
(check, if applicable)

JCS91 U.S. PTO
10/25/00
JCS95769

Assistant Commissioner for Patents
BOX PATENT APPLICATION
Washington, DC 20231

Attorney Docket No. 9598-101U2 (99-0356)
First Named Inventor: Darwin J. Prokop
Express Mail Label No. EL631606091US
Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

ISOLATION AND EXPANSION OF HUMAN MARROW STROMAL CELLS

which is:

an Original; or
a Continuation, Divisional, or Continuation-in-part (CIP)
of prior Application No. _____ filed _____.

Anticipated Group/Art Unit: ____ or Class ____, Subclass ____.

This non-provisional patent application is based on Provisional Patent Application Nos. 60/162,474, filed October 29, 1999; and 60/189,109, filed March 14, 2000.

Enclosed are:

- Specification (including Abstract) and claims: 64 pages.
- Non-executed Declaration.
- Copy of Declaration from prior application.
- Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).
- 32 sheets of drawings (formal) plus one copy.
- Microfiche computer program (Appendix).
- Nucleotide and/or Amino Acid Sequence Submission, including:
 - Computer readable copy Paper Copy Verified Statement.
 - Under PTO-1595 cover sheet, an assignment of the invention.
 - Certified copy(ies) of _____ Application No(s). _____ filed _____ is/are filed:
 - herewith or in prior application _____.
- Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37 C.F.R. §1.27 as an Independent Inventor, or a Small Business Concern, or a Non-Profit Organization.
- Preliminary Amendment.
- Information Disclosure Statement, PTO-1449, and cited references.
- Other:

The filing fee is calculated as follows:

			SMALL ENTITY				LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$355				BASIC FEE: \$710	
Total	41-20 =	21	X9	\$	OR	X18	\$ 378	
Independent	9- 3=	6	X40	\$	OR	X80	\$ 480	
[] Multiple Dependent Claims Present			\$135	\$	OR	\$270	\$	
			TOTAL	\$	OR	TOTAL	\$1,568	

- [] The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.
- [X] A check in the amount of \$1,568.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 209598.0118)** as noted below. A duplicate copy of this sheet is enclosed.
- [X] Any overpayments or deficiencies in the above-calculated fee.
- [] Filing fee in the amount of \$ _____ as calculated above.
- [X] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- [X] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS:

April 23, 2013 By: Kathryn Doyle
(Date)

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Enclosures